



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2019 Ending Date: 12/31/2019

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

<u>Mary Winstanley O'Connor</u> Candidate Full Name (if applicable)	<u>None</u> Committee Name
<u>Assessor Arlington</u> Office Sought and District	 Name of Committee Treasurer
<u>781 Concord Tpk</u> Residential Address	 Committee Mailing Address
E-mail: <u>mocconnor@koi-la.com</u>	E-mail: 
Phone # (optional): <u>617 523-1010</u>	Phone # (optional): 

## SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

0

Line 5: Ending Balance (line 3 minus line 4)

0

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

None

### Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Treasurer's signature)

Date: \_\_\_\_\_

### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

#### Candidate with Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

#### Candidate without Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: \_\_\_\_\_ (Candidate's signature)

Date: 1/8/2020



Commonwealth  
of Massachusetts

File with: Director  
Office of Campaign and Political Finance  
One Ashburton Place, Room 411, Boston, MA 02108

CPF ID #: \_\_\_\_\_  
(For Office Use Only)

**Form CPF D104:**  
**Statement of Candidate**  
**Not Raising or Expending Campaign Funds**  
**Office of Campaign and Political Finance**

(617) 979-8300 / (800) 462-OCPF  
ocpf@cpf.state.ma.us  
http://www.ocpf.us

**CHECK ONE:** ☒ I do not have a political committee. **OR** ☐ I have organized a political committee on my behalf.

Candidate's Name: Mary Winstonley O'Connor  
Office Sought/District: Assessor - Arlington, MA  
Residential Address: 781 Concord Tpk.  
City / State / Zip: Arlington, MA 02476  
E-Mail Address: mocconnor@koilaw.com Phone Number: 617-523-1010

I hereby certify that I have not opened a campaign bank account for campaign funds because I do not intend to accept contributions, make expenditures, including expenditures of my own funds, or incur liabilities for any campaign-related purpose. I submit the following as my campaign report for all bank reporting periods in this election cycle as provided for in Chapter 55 of the Massachusetts General Laws:

1. Ending balance from previous report	ZERO
2. Total receipts for reporting period	ZERO
3. Subtotal	ZERO
4. Total Expenditures for reporting period	ZERO
5. Ending balance	ZERO

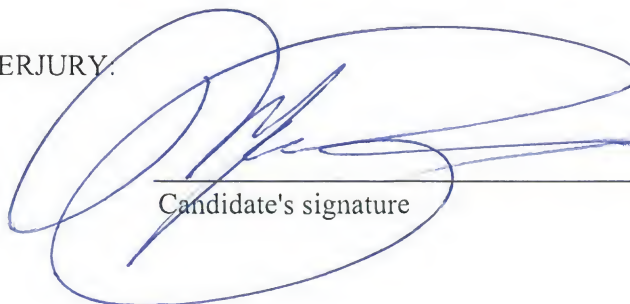
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If, after filing this statement, I decide to raise or expend funds for a campaign-related purpose, I will immediately designate a depository bank, open an account at the designated bank, and complete and file an Appointment of Depository Bank (D103) Form.

Until such notice is on file with the Director, I certify that the above Zero report will be in effect for each reporting period required by Chapter 55 of the Massachusetts General Laws.

SIGNED UNDER THE PENALTIES OF PERJURY.



Candidate's signature

Date: 12/30/2019